



# APPLYING

## Applying

Principles and Practices of  
Functional Behavioral Analysis to  
Therapeutic Behavioral Services

Regional Training Part 1: Assessment



# OBJECTIVES

## Learning Objectives

### Module I

# Learning Objectives

- Defining characteristics of TBS
- TBS eligibility criteria
- How to conduct a TBS assessment that would include fundamental principles of functional behavioral analysis
- How to develop a TBS client plan that would include behavior intervention practices
- TBS documentation requirements

# CHARACTERISTICS

## Characteristics of TBS

### Module II

# Characteristics of TBS

TBS is a behavioral intervention based on behavior analysis principles and practices.



# Characteristics of TBS

(See DMH LETTER NO.: 99-03, DMH INFORMATION NOTICE NO.: 99-09)

An Early Periodic Screening, Diagnosis,  
and Treatment (EPSDT) Medi-Cal  
service

One-to-one therapeutic contact  
between provider and beneficiary



# Characteristics of TBS

(See DMH LETTER NO.: 99-03, DMH INFORMATION NOTICE NO.: 99-09)

- Short-term
- Goal directed, in support of achieving the lowest appropriate level of placement
- Targets specific behaviors that are barriers to achieving the lowest appropriate level of care

# Characteristics of TBS

(See DMH LETTER NO.: 99-03, DMH INFORMATION NOTICE NO.: 99-09)

- Designed to provide the child/youth with skills to effectively manage the behavior(s) that are barriers to achieving lowest appropriate level of placement
- For child/youth with severe functional impairment





# Eligibility of TBS

## Module III

# Eligibility of TBS

- Medi-Cal Beneficiary
- Medical necessity
- Member of the “class” **in Emily Q.** lawsuit

# Eligibility of TBS

- Medi-Cal beneficiary
  - Full scope
  - Under the age of 21
- Medical necessity
  - Those DSM-IV diagnoses that are the responsibility of the County Mental Health Plans (see Title 9, California Code of Regulations, Section 1830.205)

# Eligibility of TBS

- Member of the TBS “class” in Emily Q. lawsuit
  - Currently in RCL 12 or higher, **or**
  - At Risk of a RCL 12 or higher, **or**  
(At Risk for placement as defined by the county)
  - One or more emergency hospitalizations in past 24 months, **or**
  - Previously received TBS

# Eligibility of TBS

- Beneficiary is receiving other specialty mental health services, **and**
- Without TBS the current placement will be jeopardized, or a higher level of placement will be needed, **or**
- TBS is needed to transition to a lower level of residence

# Eligibility of TBS

- TBS is not allowable under the following circumstances:
  - Solely for the convenience of the family or other caregivers, physicians or teachers
  - Solely to ensure self or other's safety (i.e. suicide watch)
  - Solely to provide supervision or to assure compliance with terms and conditions of probation
  - Non-mental health conditions
  - Inpatient, Psychiatric Health Facilities, Institutes for mental disease, skilled nursing facilities, crisis residential programs, and locked juvenile justice settings



# Eligibility of TBS

- TBS is not available if:
  - A child or youth will never be able to sustain non-impulsive, self-directed behavior and engage in community activities without full supervision.
  - A child or youth can sustain non-impulsive, self-directed behavior, can handle themselves appropriately in social situations with peers, and can appropriately handle transitions during the day.



# ASSESSMENT

Assessment

Module IV



# Assessment:

## Incorporating Functional Behavioral Analysis

- Assessing and evaluating behavior in context:
  - Age/Development
  - Gender
  - Race, Ethnicity, Culture
  - Sexual Identity
  - Other



# Assessment

- Sources of information
  - Review of past assessments and other records
  - Interviews of key informants including parents, caregivers, teachers, other service providers
  - Interview of the youth
  - Observation of the youth in key settings, including residence, school, and community



# Assessment

- Determine eligibility for TBS
- Provide specific information needed to develop an effective TBS client plan which includes fundamental principals of functional behavioral analysis
  - Are there specific behavior(s) that are barriers to the lowest appropriate level of care?
    - Target behaviors
  - What specific behavioral interventions are needed to teach the child/youth skills to effectively manage these behavior(s)?



# Assessment

What adaptive behaviors  
does the child/youth  
currently use?





# Assessment: Principles of Functional Behavioral Analysis

- Behavior is a form of communication.
- All behavior is goal directed and has a function.
- Understanding the function of maladaptive behavior is critical to developing an effective client plan.



# Assessment: Principles of Functional Behavioral Analysis

- Description of the Target Behavior
  - What?
  - When?
  - Where?
  - Who?
  - When, where, and with whom does the behavior **never** occur?



# Assessment: Principles of Functional Behavioral Analysis

- TBS assessment needs to document the occurrence of the behavior including:
  - Frequency
  - Intensity
  - Duration



# Assessment: Principles of Functional Behavioral Analysis

- Behavior is a function of antecedent events and consequences. Understanding these events is also critical to developing an effective client plan.
- TBS assessment needs to document the “meaning” of the behavior, including the relationship between antecedent events and consequences.



# Assessment

- Antecedent events
  - Who is around prior to the target behavior occurring?
  - What is the activity prior to the target behavior?
  - When in the day or night do the behaviors occur?
  - Where is the child or youth prior to the target behavior occurring?



# Assessment

- Consequences
  - What is the effect of the behavior?
  - How do others respond?
  - Are there any physiological effects?
  - Are there any social interaction effects?  
An increase or decrease in social demands?





# Assessment

- Mediating factors
  - Is a health condition contributing to the target behavior?
  - Is there documented evidence of brain injury or other neurological disorder?
  - Does the youth experience difficulty with perception or interpretation? Developmental delay, learning disability, thought disorder, other?
  - Does the youth have cognitive distortions, expectations, beliefs and/or others that contribute to the target behavior?



# CLIENT PLAN

Client Plan

Module V



# Client Plan: Requirements

- Services must be provided under the direction of a Licensed Practitioner of the Healing Arts (LPHA)
- Specific target behaviors or symptoms listed
- Specific interventions to resolve target behaviors
- Specific outcome measures to demonstrate behaviors have declined/ been replaced

# Client Plan: Components

- Individualized to the specific youth and behavior(s)
- Interventions are clearly and concretely described
- Proposed frequency, intensity, duration, and location of TBS is specified
- Detailed description of each intervention
- Individuals responsible for the interventions are noted
- Behavioral goals are clearly and concretely stated
- Steps to transition from, or phase out TBS



# Client Plan: Interventions

- Consider age and level of development, gender, race, ethnicity, culture, sexual identity and other unique factors.
- Consider what has been tried in the past, noting both successful and unsuccessful interventions.
- Include a crisis plan.
- Positive behavioral interventions promote the establishment of skills – for the child or youth, family and important others.



# Client Plan: Interventions

- Build interventions that can be implemented well, given the child or youth's abilities, and resources available to the family or environment.
- Promote generalization.
- Include transition plan.





# Client Plan: Interventions

Creating TBS interventions requires an understanding of positive behavioral intervention; the benefit of a good assessment, creativity, input from the child/youth, their family, and others.



# DOCUMENTATION

Documentation

Module VI



# Documentation

- Evidence that the youth meets Medi-Cal and Emily Q. lawsuit class requirements
- TBS client plan
- TBS is integrated with overall specialty mental health client plan
- Transition plan
  - All children/youth
  - Those children/youth approaching 21



# Documentation

- Notification to State Department of Mental Health
- Authorization forms: for current requirements, check with local MHP
- After services start, progress note for each contact noting provision of service, response, continued need, and likelihood of benefit



# Documentation

- TBS client plan addendum
  - Complete when progress in terms of intensity, duration, and frequency is not observed at monitoring intervals and/or when TBS has not been terminated within the original estimated timeframe.
  - Use to:
    - Identify and explain significant changes in the child or youth's environment which may explain the lack of progress
    - Describe circumstances that have presented obstacles to change
    - Identify and explain actions that will be taken such as case consultation, or changes in coaches

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  - To view past Q&A's, go to: [www.cimh.org](http://www.cimh.org), view TBS project and click to review previously posted questions and answers

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For more information:

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